



## PROCEDURE INFORMATION

# LUMBAR FACET INJECTION

### FOR NECK AND ARM PAIN

A lumbar facet injection is a simple procedure for treating back and buttock pain. This information sheet will explain what it is. Your doctor can also explain if this procedure is appropriate for you.

What are lumbar facet joints?

Facet joints connect the vertebrae, the bones of the spine. They help guide your spine when you move. The lumbar spine contains 5 vertebrae.

Facet joints are found on both sides of the spine. Each is about the size of a thumbnail. Lumbar facet joints are named for the vertebrae they connect and the side of the spine where they are found. The right L3-4 facet joint, for example, joins the third and fourth vertebrae on the right side.

### WHAT IS LUMBAR FACET JOINT PAIN?

You may feel pain if a lumbar facet joint is injured. Sometimes it feels like simple muscle tension. Other times it can be severe pain.

The cartilage inside the joint may be injured. Other times only connecting ligaments surrounding the joints are injured.

Facet pain also depends on which facet joint is affected. Lumbar facet pain can occur in an area from your back down to your knees. The diagram shows areas of pain usually associated with specific joints.

### HOW DO I KNOW IF I HAVE LUMBAR FACET PAIN?

If you have pain in one or more of these areas when you move your back, and it lasts longer than 2 months, you may have lumbar facet pain. Common tests such as x-rays or MRIs may not show if a facet joint is causing pain.

### WHAT IS A LUMBAR FACET INJECTION?

In a lumbar facet injection, an anesthetic and a steroid are injected into one or more of your lumbar facet joints.

The injection can be used to diagnose or treat. An anesthetic and steroid may be injected to see if they temporarily lessen your pain. If they do, and if this helps you move better, it tells the doctor which facet joint is causing the pain. The steroid is used to treat inflammation of the facet joint.

### WHAT HAPPENS DURING AN INJECTION?

The injection may start with an IV (medicine given intravenously) to help you relax. A local anesthetic may be used to numb your skin.

The doctor will insert a thin needle directly into the facet joint. Fluoroscopy, a type of x-ray, may be used to ensure the safe and proper position of the needle. A dye may also be injected to ensure the needle is in the correct location.

When the doctor is sure the needle is in the correct location, the anesthetic and steroid will be injected.

### WHAT HAPPENS AFTER AN INJECTION?

You will be monitored for up to 30 minutes after the injection. When you are ready to leave, the clinic will give you the discharge instructions. You will also be given a pain diary. It is important to fill this out because it helps your doctor know how the injection is working.

It may help to move your back in ways that hurt before the injection, to see if the pain is still there, but do not overdo it. Take it easy for the rest of the day.

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You may feel immediate pain relief and numbness in your back for up to 6 hours after the injection. This tells you the medication has reached the right location.

Your pain may return after this short pain-free period, or may even be a little worse for a day or 2. This is normal. It may be caused by needle irritation or by the steroid itself. Steroids usually take 2 or 3 days to begin working, but can take as long as one week.

You can usually return to work the next day, but always check with your doctor.

## HOW LONG CAN I EXPECT PAIN RELIEF?

How long you can expect relief depends on how many areas are injured, and on the amount of inflammation.

Sometimes an injection can bring several months of pain relief, and then more treatment is needed. Other times, particularly if there is no underlying bone or joint problem, one injection brings long-term pain relief. If your pain is caused by injury to more than one area, only some of your symptoms may be helped by one injection.

## WHAT ARE THE POSSIBLE RISKS AND SIDE EFFECTS?

As with all invasive medical procedures, there are potential risks. Risks are rare, but may include infection, bleeding, allergic reaction, headache, dural puncture, temporary numbness or tingling, weakness, and nerve injury.

Side effects are rare and, when they occur, are usually due to the steroid itself. These include, but are not limited to, pain at the injection site, headache, increased blood sugar, water retention, facial flushing, irritability, sleeplessness, burst of energy, and skin discoloration at the injection site.

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THIS PAMPHLET IS FOR GENERAL EDUCATION ONLY. SPECIFIC QUESTIONS OR CONCERNS SHOULD ALWAYS BE DIRECTED TO YOUR PROVIDER. YOUR PROVIDER CAN EXPLAIN POSSIBLE RISKS OR SIDE EFFECTS AND OTHER READILY AVAILABLE TREATMENT OPTIONS